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DATE: NOVEMBER 3, 2006

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TO: Patent Department	COMPANY: U.S. Patent & Trademark Office	FAX NUMBER: 571-273-8300	PHONE NUMBER: 571-272-1000
FROM: John P. Blasko	PHONE NUMBER: EMAIL: (609) 895-6639 jblasko@foxrothschild.com	BILLING NUMBER: 1149	
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NOTES/COMMENTS:

U.S. Patent Serial No. 10/717,226; filed November 19, 2003; Kim et al.; for "Apparatus and Method for Whitening Teeth"

1. Transmittal Form (1 page)
2. Fee Transmittal (1 page)
3. Response Under 37 C.F.R. § 1.111 (11 pages)
4. Petition for Extension of Time (1 page)
5. Information Disclosure Statement (1 page)
6. Copies of Certified Translation of Korean Priority Document (49 pages)
7. Terminal Disclaimer (3 pages)

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TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/717,228
Filing Date	November 19, 2003
First Named Inventor	KIM,
Art Unit	1614
Examiner Name	ROBERTS, Lezah
Attorney Docket Number	39894.00601

ENCLOSURES (Check all that apply)																		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Copies of certified translation of Korean priority document																
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